

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with:

Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD  
h.d.  
2010 JAN 14 PM 4:17

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

IMPORTANT: Indicate by # type of committee you are reporting for: 1

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

### CANDIDATE COMMITTEES ONLY:

Candidate Name

MICHAEL A. MAURO

Political Party (if applicable)

DEMOCRAT

Office Sought

SECRETARY OF STATE

District (if Senate or House)

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

*Samela K. Ganner*

SIGNATURE OF PERSON FILING REPORT

515.971.3655

TELEPHONE

1.14.10

DATE SIGNED

I AM FILING A JANUARY 19, 2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 47,770.07

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

66,513.31

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 114,283.38

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

13,383.16

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 100,900.22

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

3,033.87

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

### CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3.30.09	ID# CK#	PEGGY RICE 2340 MONTANA AVE. BOX 338 DAKOTA CITY, IA 50529		\$20.00	<input type="checkbox"/>
3.30.09	ID# CK#	RAYMOND DIPAGLIA 4500 MERLE HAY RD DM, IA 50310		100.00	<input type="checkbox"/>
3.30.09	ID# CK#	ROBERT OSTERHAUS 216 AUSTIN AVE MAQUOKETA, IA 52060		100.00	<input type="checkbox"/>
4.1.09	ID# CK#	JOHN DONAHEY 10821 DOUGLA AVE APT. 202 URBANDALE, IA 50322		25.00	<input type="checkbox"/>
4.15.09	ID# CK#	KAREN PRATTE 1627 BRADY DR WATERVILLE, IA 52170		25.00	<input type="checkbox"/>
6.3.09	ID# CK#	BRAD BURNQUIST 225 PRAIRIE VIEW DR. APT 10220 WDM, IA 50266		100.00	<input type="checkbox"/>
6.18.09	ID# CK#	MARILYN SPINA 2545 E OVID AVE DM, IA 50317		60.00	<input checked="" type="checkbox"/>
6.18.09	ID# CK#	GARY RANDA 3029 WOLCOTT AVE DM, IA 50321		100.00	<input checked="" type="checkbox"/>
6.18.09	ID# CK#	MICHAEL GARTNER 100 MARKET ST UNIT 515 DM, IA 50309-4766		500.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1030.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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7.9.2009	ID# 6107 CK# 3659	QWEST IPAC NO. 6107 925 HIGH ST. 9S9 DES MOINES, IA 50309		\$240.00	<input checked="" type="checkbox"/>
7.9.2009	ID# 6113 CK# 004141	AFSCME/IOWA PUBLIC EMPLOYEES COUNCIL 61 PEOPLE ACCOUNT 4320 NW SECOND AVE. DM. IA 50313		240.00	<input checked="" type="checkbox"/>
7.9.2009	ID# CK#	JAMES HAYES 1142 E COURT ST IOWA CITY, IA 52240		500.00	<input checked="" type="checkbox"/>
7.9.2009	ID# CK#	DAVID HURD 300 WALNUT ST. NO. 183 DM, IA 50309		500.00	<input checked="" type="checkbox"/>
7.9.2009	ID# CK#	JAMES COWNIE 141 - 37TH ST DM, IA 50312		500.00	<input checked="" type="checkbox"/>
7.9.2009	ID# CK#	RICHARD MARGULIES 2100 WESTOWN PARKWAY SUITE 220 WDM, IA 50265		500.00	<input checked="" type="checkbox"/>
7.9.2009	ID# CK#	CRAWFORD LAW FIRM 1701 RUAN CENTER DM, IA 50309		500.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2980.00	
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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7.13.09	ID# CK#	ED SKINNER BOX 367 ALTOONA, IA 50009		\$500.00	<input checked="" type="checkbox"/>
7.14.09	ID# CK#	FRANICS SMITH 1230 NE WESTHSORE BLVD MANTENO, IL 60950		250.00	<input checked="" type="checkbox"/>
7.15.09	ID# CK#	HARRY BOOKEY 400 LOCUST ST., SUITE 790 DM, IA 50309		100.00	<input checked="" type="checkbox"/>
7.15.09	ID# CK#	RICK WANAMAKER 710 SOUTHFORK WAUKEE, IA 50263		250.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	JOHN LIEPA 603 E SALEM AVE INDIANOLA, IA 50125		50.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	WILLIAM LILLIS 3000 PATRICIA DR DM, IA 50322		100.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	RAYMOND DIPAGLIA 4500 MERLE HAY RD DM, IA 50310		100.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	TOM TIMMONS BOX 14 PRAIRIE CITY, IA 50228		100.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	EDWARD NAHAS 31701 SILVERADO LANE WAUKEE, IA 50263-7080		100.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	JAMES MALONEY 3940 RIVER OAKS DR DM, IA 50312		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1650.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

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7.20.09	ID# 6248 CK#	AFSCME Local 1868 - Polk County Employees People Pac 6248 - 111 Court Ave., DM, IA 50309		\$240.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	Larry Land 6048 Terrace Drive Johnston, IA 50131		250.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	James Carney 400 Homestead Bldg - 303 Locust St. Des Moines, IA 50309		500.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	Staci Appel 10901 - 180th Ave. Ackworth, IA 50001		500.00	<input checked="" type="checkbox"/>
7.20.09	ID# CK#	Michael Coppola 4521 Fleur Drive, Suite C Des Moines, IA 53021		500.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1990.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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7.30.09	ID# CK#	VINCENT ALLEGRA 442 S MONROE HINSDALE, IL 60521		\$250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	FRANK CAPUTO 2501 NELSON SQ WESTCHESTER, IL 60154		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	JOHN KAUFMAN 1550 FOREST AVE HIGHLAND PARK, IL 60035		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	MICHAEL BARTOLIC 225 W QUINCY ST WESTMONT, IL 60559		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	CARMEN PAULO 380 W MCKINLEY AVE ELMHURST, IL 60126		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	CHRISTOPHER POHLMAN, JR 221 W QUINCY WESTMONT, IL 60559		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	MICHAEL SYLVESTER 1748 W OHIO ST CHICAGO, IL 60622		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	ERNIE TALARICO III 333 N JEFFERSON ST. UNIT 602 CHICAGO, IL 60661		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	JOSEPH TOSCANO 8215 W 138TH ST ORLAND PARK, IL 60462		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	MIKE SMITH 3421 MORRISON ST NORTHWEST WASHINGTON, DC 20015		1000.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 3250.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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7.30.09	ID# CK#	JAKE DEEGAN 829 E 19TH ST N NEWTON, IA 50208		\$60.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	JONATHAN WILSON 2924 DRUID HILL DR DM, IA 50315		100.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	CONNIE WIMER 100 - 4TH ST DM, IA 50309		100.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	JACK HATCH 696 - 18TH ST DM, IA 50314		100.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	DENNIS PARROTT 345 W 28TH ST S. #5 NEWTON, IA 50208		180.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	WILLIAM KNAPP II 5221 NW 70TH PL JOHNSTON, IA 50131		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	GERRARD NEUGENT 2410 PARK AVE DM, IA 50321		250.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	BONNIE CAMPBELL 3131 FLEUR DR UNIT 702 DM, IA 50321		500.00	<input checked="" type="checkbox"/>
7.30.09	ID# 9777 CK# 1014	UnitedHealth Group Inc. PAC of Iowa 9900 Brend Road East Minnetonka, MN 55342		500.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	BRICK, GENTRY, BOWERS, SWARTZ & LEVIS 6701 WESTOWN PKWY SUITE 100 WDM, IA 50266		500.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 2540.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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7.30.09	ID# CK#	BILL KNAPP 4949 WESTOWN PKWY SUITE 200 WDM, IA 50266		\$500.00	<input checked="" type="checkbox"/>
7.30.09	ID# CK#	GALT REAL ESTATE P.O. BOX 342 CLARION, IA 50525		500.00	<input checked="" type="checkbox"/>
8.7.09	ID# CK#	MARC BELTRAME 3409 SW 44TH PL DM, IA 50321		500.00	<input checked="" type="checkbox"/>
8.7.09	ID# 6004 CK# 4903	ASSOC. GEN. CONTRACTORS OF IA PAC 701 E COURT AVE DES MOINES, IA 50309		500.00	<input checked="" type="checkbox"/>
8.7.09	ID# CK#	ROXANNE CONLIN 319 SEVENTH ST. SUITE 600 DM, IA 50321		500.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2500.00

**TOTAL (if last page of this schedule)**

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
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08.18.09	ID# CK#	TOM HOCKENSMITH 3502 E. 43RD CT DM, IA 50317		\$50.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JEAN HESSBURG 1044 44TH ST DM, IA 50311		50.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	BRAD BURNQUIST 225 PRAIRIE VIEW DR APT. 10220 WDM, IA 50266		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	MARK GODWIN 348 E GRAY ST DM, IA 50315		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	FRANK CATALDO, JR 3915 WAKONDA DR DM, IA 50321		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JOSEPH SHANNAHAN 2801 EP TRUE PKWY #703 WDM, IA 50265		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	NATHAN GODWIN 5811 NW 104TH CT JOHNSTON, IA 50131		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	DANIEL KUETER 19279 252ND AVE BETTENDORF, IA 52722		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	BYRON MARTIN 4755 KIMBERLY LANE PH, IA 50327		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	MATT GANNON 400 WALNUT ST. APT 602 DM, IA 50309		60.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$580.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08.18.09	ID# CK#	MICHAEL CALIGIURI 670 BRENTWOOD DR WAUKEE, IA 50263		\$60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JOHN MAURO 3021 STATNON AVE DM, IA 50321	Brother	60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	WILLIAM GANNON 205 E BLUFF ST., PO BOX 67 MINGO, IA 50168		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JOHN CHIODO 2809 EMMA AVE DM, IA 50321		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	BRICE OAKLEY 418 38TH PL DM, IA 50312		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	DARREN MARASCO 601 ORCHARD HILLS DR #6008 NORWALK, IA 50211		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	MICHAEL OMEARA 4621 FIELDSTONE DR WDM, IA 50265		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	BILLY MCFALL 3313 SW 33RD ST DM IA 50321		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	LARRY LAUGHLIN 690 BRENTWOOD DR WAUKEE, IA 50263		60.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	STEVEN FORITANO 744 52ND ST DM, IA 50312		60.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 600.00	
TOTAL (if last page of this schedule)				\$	

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Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8.18.09	ID# CK#	JOHN SARCONI 3004 SW 39TH ST. DM, IA 50321		\$60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	A. JOHN DAVIS 525 WATERBURY CIR DM, IA 50312		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	JARRETT SCHNEIDER 308 KELLING ST RENWICK, IA 50577		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	TOM COPE 8532 NEWBURY CT JOHNSTON, IA 50131		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	TIM MAURO 1173 S 49TH ST WDM, IA 50265	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	KIRK BESH 3301 SW 33RD ST DM, IA 50321		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	JOHN CACCIATORE 1700 CASADY DR DM, IA 50315		75.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	HARTUNG & SCHROEDER 608 LOCUST ST., SUITE 100 DM, IA 50309		100.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	GARY DICKEY, JUR 3201 WATROUS AVE DM, IA 50321		100.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 635.00

TOTAL (if last page of this schedule)

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08.18.09	ID# CK#	SHARI FITZGERALD 726 N 3RD ST FORT DODGE, IA 50501		\$100.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	ROSEMARY MOODY 5285 E OAKWOOD DR PLEASANT HILL, IA 50327		100.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JOSEPH JONGEWAARD 4039 OVID AVE DM, IA 50310		100.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	STEPHEN LARSON 5959 CENTURY WAY W JOHNSTON, IA 50131		100.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	RON PARKER 1044 44TH ST DM IA 50311		125.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	JOHN PEDERSON 1075 44TH ST DM, IA 50311		125.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	ROBERT BEH 1600 CASADY DR DM, IA 50315		150.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	MARK WANDRO 8128 WILDEN DR URBANDALE, IA 50322		150.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	F. RICHARD THORNTON 3667 GRAND AVE #3 DM, IA 53012		150.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	DUSKY TERRY 355 NW LOCUST AVE EARLHAM, IA 50072		200.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1300.00	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08.18.09	ID# CK#	JO OLDSON & BRICE OAKLEY 418 38TH PL DM IA 50312		\$200.00	<input checked="" type="checkbox"/>
08.18.09	ID# <del>590</del> 6113 CK# 004144	AFSCME/Iowa Public Employees Council 61 People Account 4320 NW Second Ave. DM. IA 50313		260.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	ALPHONSE CARDAMONE 2 S ATRIUM WAY UNIT 404 ELMHURST, IL 60126		250.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	RICHARD MYERS 9 WOODLAND HEIGHTS IOWA CITY, IA 52240		300.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	RITA TALARICO 632 SAWGRASS NORWALK, IA 50211		500.00	<input checked="" type="checkbox"/>
08.18.09	ID# CK#	PAMELA CONNER 2715 E 40TH ST. DM, IA 50317		500.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2010.00

TOTAL (if last page of this schedule)

\$

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Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8.18.09	ID# CK#	Dan Mauro 8206 Buchanan Trail Norwalk, IA 50211	nephew	\$60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Frank Mauro, JR 3611 SW 35th St Des Moines, IA 50321	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Duke McCargar 3216 SW 33rd St Des Moines, IA 50321	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Rob McCargar 2913 N Birch Ave Cumming, IA 50061	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	John Paletta 3700 SW 35th St Des Moines, IA 50321		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Mark Ramsey 4130 127th St Urbandale, IA 50322		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Rocky Sposato 5213 SE 31st St Des Moines, IA 50320		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Joe Mauro 3121 SW 38th Pl Des Moines, IA 50321	brother	240.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Unitemized Contributions		40.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 700.00

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Elect Michael A Mauro

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8.18.09	ID# CK#	Brett Bunkers 4620 SE 34th St Des Moines, IA 50320		\$60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Toby Davis 3124 SW 29th St Des Moines, IA 50321		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Jeff Chiodo 5441 SE 29th St Des Moines, IA 50321		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Joe Gatto 2717 Emma Ave Des Moines, IA 50321		60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Tony Mauro 3010 Stanton Ave Des Moines, IA 50321	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Jim Mauro 3710 SW 35th St. Des Moines, IA 50321	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Randy Mauro 113 Ranchel Dr Des Moines, IA 50320	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Joe Mauro 3614 Rose Ave Des Moines, IA 50321	nephew	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Nick Mauro 3906 Wakonda Dr Des Moines, IA 50321	son	60.00	<input checked="" type="checkbox"/>
8.18.09	ID# CK#	Steve Mauro 3224 Summit Vista Dr Des Moines, IA 50321	son	60.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 600.00	
TOTAL (If last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS



CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8.22.09	ID# CK#	WILLIAM RUSSELL 121 S FERGUSON LAMONI, IA 50140		\$25.00	<input type="checkbox"/>
8.27.09	ID# CK#	JENNIFER CHIODO 5441 SE 29TH ST DM, IA 50321		280.00	<input type="checkbox"/>
8.27.09	ID# CK#	JEFFREY CHIODO 5441 SE 29TH ST DM, IA 50321		500.00	<input type="checkbox"/>
8.27.09	ID# CK#	SEAN MCMAHON 201 GRAND AVE DM, IA 50309		50.00	<input type="checkbox"/>
9.8.09	ID# CK#	SEBASTIAN S. PALUMBO 321 S CENTER HILLSIDE, IL 60162		250.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1105.00

**TOTAL (if last page of this schedule)**

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9.22.09	ID# CK#	KAREN LIGOURI 3925 SW 28TH PL DM, IA 50321		\$500.00	<input type="checkbox"/>
9.22.09	ID# CK#	LINDA DICKERSON 2617 DRIFTWOOD AVE DM, IA 50320		500.00	<input type="checkbox"/>
9.22.09	ID# CK#	MICHELLE BUNKERS 4620 SE 34TH ST DES MOINES, IA 50320		500.00	<input type="checkbox"/>
9.22.09	ID# CK#	ROB MCCARGAR 2913 N BIRCH AVE CUMMING, IA 50061	NEPHEW	500.00	<input type="checkbox"/>
9.22.09	ID# CK#	JODI MAURO 1110 RANCHEL DR DM, IA 50321	NIECE	500.00	<input type="checkbox"/>
10.05.09	ID# CK#	JULIE HAGGERTY 9916 TANGLEWOOD DR DM, IA 50322		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2600.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
11.17.09	ID# CK#	JOAN KIRK 2407 - 400TH AVE FARRAGUT, IA 51639		\$20.00	<input type="checkbox"/>
11.17.09	ID# CK#	KAY CLARK 2151 - 350TH ST PLYMOUTH, IA 50465		20.00	<input type="checkbox"/>
11.17.09	ID# CK#	MICHELE ERICKSON 1232 N 8TH ST ESTHERVILLE, IA 51334		25.00	<input type="checkbox"/>
11.17.09	ID# CK#	HOLLY FOKKENA PO BOX 597 ALLISON, IA 50602		100.00	<input type="checkbox"/>
11.17.09	ID# CK#	KEN KLINE 731 S MONROE CT MASON CITY, IA 50401		100.00	<input type="checkbox"/>
11.17.09	ID# CK#	TOM SLOCKETT 629 BROWN ST IOWA CITY, IA 52245		100.00	<input type="checkbox"/>
11.17.09	ID# CK#	LINDA LANGENBERG 5105 NE 23RD AVE UNIT 1201 PLEASANT HILL, IA 50327		300.00	<input type="checkbox"/>
11.17.09	ID# CK#	MICHAEL COPPOLA 4521 FLEUR DR SUITE C DES MOINES, IA 50321		2500.00	<input type="checkbox"/>
11.17.09	ID# CK#	MICHAEL GARTNER 100 MARKET ST. UNIT 515 DES MOINES, IA 50309		4000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 7165.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
11.19.09	ID# CK#	BEV HORTON 119 - 10TH AVE. NW ALTOONA, IA 50009		\$25.00	<input type="checkbox"/>
11.19.09	ID# CK#	VIRGINIA TESDELL 6882 NE 56TH ST ALTOONA, IA 50009		25.00	<input type="checkbox"/>
11.19.09	ID# CK#	GARY PALMER 7070 NE 64TH ALTOONA, IA 50009		400.00	<input type="checkbox"/>
11.19.09	ID# CK#	SANDRA RASMUSSEN P.O. BOX 295 NW 66TH AVE DM, IA 50315		1000.00	<input type="checkbox"/>
11.19.09	ID# CK#	KURT RASMUSSEN 6846 NW BEAVER DR JOHNSTON, IA 50131		1000.00	<input type="checkbox"/>
11.19.09	ID# CK#	BRAD SKINNER 1810 ANDREWS DR PLEASANT HILL, IA 50327		1000.00	<input type="checkbox"/>
11.19.09	ID# CK#	ED & LOIS SKINNER PO BOX 367 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
11.19.09	ID# CK#	DON TIMMONS 8409 NE 54TH AVE ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
11.19.09	ID# CK#	GERI HUSER PO BOX 367 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 6450.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL MAURO

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11.20.09	ID# CK#	JOHNATHAN NEUNABER 17279 - 180TH ST AKRON IA 51001-8755		\$8.31	<input type="checkbox"/>
11.20.09	ID# CK#	STACI APPEL 10901 - 180TH AVE ACKWORTH, IA 50001		100.00	<input type="checkbox"/>
11.20.09	ID# CK#	JAMES C. CONLIN 2900 SOUTHERN HILLS CIRCLE DES MOINES, IA 50321		1000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1108.31

**TOTAL (if last page of this schedule)**

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

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11.24.09	ID# CK#	RICHARD OLIVE 1264 NORTHRIDGE RD P.O. BOX 273 STORY CITY, IA 50248		\$25.00	<input type="checkbox"/>
11.24.09	ID# CK#	DALE CREECH 1004 LAUREL ST DALLAS CENTER, IA 50063		25.00	<input type="checkbox"/>
11.24.09	ID# CK#	DEBRA BELLINGHAUSEN 840 - 290TH ST BRITT, IA 50423		25.00	<input type="checkbox"/>
11.24.09	ID# CK#	HELEN MILLER 1936 - 15TH AVE N. FORT DODGE, IA 50501		50.00	<input type="checkbox"/>
11.24.09	ID# CK#	DICK DEARDEN 3113 KINSEY AVE DM, IA 50317		50.00	<input type="checkbox"/>
11.24.09	ID# CK#	STEVEN PRATT PO BOX 9 WHITTING, IA 51063		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 225.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

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11.27.09	ID# CK#	MARY GARST 1700 130TH ST COON RAPIDS, IA 50058		\$25.00	<input type="checkbox"/>
11.27.09	ID# CK#	GRANT VEEDER 135 GRACELINE BLVD WATERLOO, IA 50701		25.00	<input type="checkbox"/>
11.27.09	ID# CK#	SHERRY MAHRENHOLZ 1325 BIRCH LN DM, IA 50315		25.00	<input type="checkbox"/>
11.27.09	ID# CK#	ANITA CAMPBELL 6671 NW 4TH COURT DM, IA 50313		50.00	<input type="checkbox"/>
11.27.09	ID# CK#	DAVID SULLIVAN 7018 FRANKLIN AVE DM, IA 50322		50.00	<input type="checkbox"/>
11.27.09	ID# CK#	MARGUERITE MC NABB 1232 WISCONSIN AVE AMES, IA 50010		50.00	<input type="checkbox"/>
11.27.09	ID# CK#	BOB RICE 821 E MILLER DM, IA 50315		100.00	<input type="checkbox"/>
11.27.09	ID# CK#	TOM TIMMONS BOX 14 PRAIRIE CITY, IA 50228		100.00	<input type="checkbox"/>
11.27.09	ID# CK#	JOHN BEESON 2637 120TH ST N.W. SWISHER, IA 5238		150.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 575.00

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.1.09	ID# CK#	BEN BEESON 2637 120TH ST NW SWISHER, IA 52338		\$10.00	<input type="checkbox"/>
12.1.09	ID# CK#	JOHN PASCUZZI 4200 SW 27TH ST DM, IA 50321		25.00	<input type="checkbox"/>
12.1.09	ID# CK#	BONIFACIO CHACON 607 MAISH AVE DM, IA 50315		25.00	<input type="checkbox"/>
12.1.09	ID# CK#	CAROLYN COLOSIMO 806 MAISH AVE DM, IA 50315		50.00	<input type="checkbox"/>
12.1.09	ID# CK#	JULIE FLEMING 1139 - 46TH ST DM, IA 50311		50.00	<input type="checkbox"/>
12.1.09	ID# CK#	ARTHUR HEDBERG 1716 E 31ST CT DM, IA 50317		50.00	<input type="checkbox"/>
12.1.09	ID# CK#	MARILYN SPINA 2545 E OVID AVE DM, IA 50317		100.00	<input type="checkbox"/>
12.1.09	ID# CK#	JOSEPH LAKERS 3667 GRAND AVE UNIT 14 DES MOINES, IA 50312		100.00	<input type="checkbox"/>
12.1.09	ID# CK#	FLORENCE BURCH 601 GRAND OAKS DR WDM, IA 50265		100.00	<input type="checkbox"/>
12.1.09	ID# CK#	JERRY WATTERS 3001 N JEFFERSON INDIANOLA, IA 50125		300.00	<input type="checkbox"/>
SUB-TOTAL				\$ 810.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.1.09	ID# CK#	JAMES A COGGI 1243 - 8TH ST WDM, IA 50265		\$500.00	<input type="checkbox"/>
12.2.209	ID# CK#	CURTIS HANSON 801 N COURT ST FAIRFIELD, IA 52556		25.00	<input type="checkbox"/>
12.2.09	ID# CK#	RAYMOND DIPAGLIA 4500 MERLE HAY RD DM, IA 50310		100.00	<input type="checkbox"/>
12.2.09	ID# CK#	CHARLES HANSON 300 WALNUT ST 45 DM, IA 50309		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 725.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

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MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

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12.3.09	ID# CK#	KAREN PRATTE 1627 BRADY DR WATERVILLE, IA 52170		\$15.00	<input type="checkbox"/>
12.3.09	ID# CK#	FRANK VITO 3116 SW 14TH ST DM, IA 50315		20.00	<input type="checkbox"/>
12.3.09	ID# CK#	ANDREW WENTHE 101 E MAIN ST HAWKEYE, IA 52147		50.00	<input type="checkbox"/>
12.3.09	ID# CK#	MATTHEW BRICK 12310 TOWNSEND AVE URBANDALE, IA 50322		100.00	<input type="checkbox"/>
12.3.09	ID# CK#	MICHAEL GIUDICIESI 9410 GREENBELT DR URBANDALE, IA 50322		150.00	<input type="checkbox"/>
12.3.09	ID# <del>3181</del> 9670 CK# 3181	Ironworkers Local #89 Political Education Fund 5000 J Street SW Cedar Rapids, IA 52404		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 585.00	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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12.7.09	ID# CK#	LAWRENCE BELTRAME 1115 CAULDER AVE DM, IA 50315		\$25.00	<input type="checkbox"/>
12.7.09	ID# CK#	MARY KAY LABONIA 4210 AMICK AVE DM, IA 50310		25.00	<input type="checkbox"/>
12.7.09	ID# CK#	ANTHONY PALMER 4835 LAKEWOOD DR NORWALK, IA 50211		25.00	<input type="checkbox"/>
12.7.09	ID# CK#	VIRGINIA ROWEN 3407 CROCKER ST DM, IA 50312		25.00	<input type="checkbox"/>
12.7.09	ID# CK#	LOIS DAVIS 5221 VILLAGE RUN AVE UNIT 501 DM, IA 50317		30.00	<input type="checkbox"/>
12.7.09	ID# CK#	MARTHA SMITH 3917 TWANA DR DM, IA 50310		50.00	<input type="checkbox"/>
12.7.09	ID# CK#	MICHAEL O'MALLEY 3919 SHERMAN BLVD DM, IA 53010		50.00	<input type="checkbox"/>
12.7.09	ID# CK#	MARK WANDRO 8128 WILDEN DR URBANDALE, IA 50322		100.00	<input type="checkbox"/>
12.7.09	ID# CK#	EMIL SULENTIC 137 GLEN OAKS DR COUNCIL BLUFFS, IA 51503		100.00	<input type="checkbox"/>
12.7.09	ID# CK#	RANDY RIPPERGER 623 W WASHINGTON ST WINTERSET, IA 50273		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 530.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

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MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
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12.7.09	ID# CK#	ROBERT JOSTEN 801 GRAND AVE SUITE 3900 DM, IA 50309		\$100.00	<input type="checkbox"/>
12.7.09	ID# CK#	GEORGE DAVIS 3124 SW 29TH DM, IA 50321		200.00	<input type="checkbox"/>
12.7.09	ID# CK#	RICHARD FELICE REVOCABLE TRUST 3101 SW 32ND PL DM, IA 50321		200.00	<input type="checkbox"/>
12.7.09	ID# CK#	KATHLEEN HAMRE 14146 PINNACLE PT CLIVE, IA 50325		250.00	<input type="checkbox"/>
12.7.09	ID# CK#	GINA FONTANINI 431 - 61ST ST. DM, IA 50312		400.00	<input type="checkbox"/>
12.7.09	ID# CK#	BARB & DAVID HURD REVOCABLE TRUST 300 WALNUT ST NO. 183 DM, IA 50309		500.00	<input type="checkbox"/>
12.7.09	ID# CK#	RICHARD MARGULIES 2100 WESTOWN PKWY SUITE 220 WDM, IA 50265		2000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 3650.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.09.09	ID# CK#	AMY HORMAN 7858 BOULDER CT WDM, IA 50266		\$25.00	<input type="checkbox"/>
12.09.09	ID# CK#	MICHAEL O'MEARA 4621 FIELDSTONE DR WDM, IA 50265		25.00	<input type="checkbox"/>
12.09.09	ID# 9153 CK#	POCAHONTAS COUNTY DEMCORATS 305 3RD AVE NW POCAHONTAS, IA 50574		100.00	<input type="checkbox"/>
12.09.09	ID# CK#	TERI STEINKE 9604 MADISON AVE URBANDALE, IA 50322		100.00	<input type="checkbox"/>
12.09.09	ID# CK#	ED NAHAS 31701 SILVERADO LANE WAKUEE, IA 50263		100.00	<input type="checkbox"/>
12.09.09	ID# CK#	DIANA CARZOLI 5208 CODY DR WDM, IA 50265		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 550.00

**TOTAL (if last page of this schedule)**

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.13.09	ID# CK#	WILLIAM KEISTER 1235 WEDGEWOOD DR COUNCIL BLUFFS, IA 51503		\$25.00	<input type="checkbox"/>
12.13.09	ID# CK#	RAY BLASE 913 NE 34TH ST ANKENY, IA 50021		50.00	<input type="checkbox"/>
12.13.09	ID# CK#	ANDREA MC GUIRE 100 - 37TH ST DM, IA 50312		50.00	<input type="checkbox"/>
12.13.09	ID# CK#	HARRY R DAVIS 5884 DOGWOOD LANE JOHNSTON, IA 50131		100.00	<input type="checkbox"/>
12.13.09	ID# CK#	TONY COLACINO 4645 ELM ST. WEST DES MOINES, IA 50265		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 325.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.15.09	ID# CK#	STEVEN CUNNINGHAM 6752 SE 32ND AVE PLEASANT HILL, IA 50327		\$25.00	<input type="checkbox"/>
12.15.09	ID# CK#	JOHN CACCIATORE 1700 CASADY DR DM, IA 50315		50.00	<input type="checkbox"/>
12.15.09	ID# CK#	DENNIS GALEAZZI 310 52ND ST DM, IA 50312		50.00	<input type="checkbox"/>
12.15.09	ID# CK#	DEBRA MOORE 9725 AURORA AVE URBANDALE, IA 50322		100.00	<input type="checkbox"/>
12.15.09	ID# CK#	JUANITA MARASCO 3009 SW 29TH ST DM, IA 500321		100.00	<input type="checkbox"/>
12.15.09	ID# CK#	WILLIAM LILLIS 3000 PATRICIA DR DM, IA 50322		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 575.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12.17.09	ID# CK#	HERBERT BURGESS 116 NE 52ND AVE DES MOINES, IA 50313		\$25.00	<input type="checkbox"/>
12.17.09	ID# CK#	EILEEN HICKS 791 NORTHWEST 43RD AVE DM, IA 50313		100.00	<input type="checkbox"/>
12.17.09	ID# CK#	WILLIAM KNAPP II 5221 NW 70TH PL JOHNSTON, IA 50131		250.00	<input type="checkbox"/>
12.17.09	ID# CK#	GERARD NEUGENT 2410 PARK AVE DM, IA 50321		250.00	<input type="checkbox"/>
12.17.09	ID# CK#	WILLIAM KNAPP II 4949 WESTOWN PARKWAY SUITE 200 WEST DES MOINES, IA 50265		2000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2625.00	
TOTAL (If last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12.18.09	ID# CK#	DENNIS MURDOCK 1085 INDIAN CREEK CIR MARION, IA 52302		\$50.00	<input type="checkbox"/>
12.18.09	ID# CK#	SCOTT OURTH 110 TIMBER LANE ACKWORTH, IA 50001		50.00	<input type="checkbox"/>
12.18.09	ID# CK#	DUSKY TERRY 355 NW LOCUST AVE EARLHAM, IA 50072		100.00	<input type="checkbox"/>
12.18.09	ID# CK#	SARAH REISETTER 1311 SPRING ST DES MOINES, IA 50315		150.00	<input type="checkbox"/>
12.18.09	ID# CK#	JARRETT SCHNEIDER 308 KELLING ST RENWICK, IA 50577		150.00	<input type="checkbox"/>
12.18.09	ID# CK#	RICH EYCHANER PO BOX 1797 DES MOINES, IA 50305		100.00	<input type="checkbox"/>
12.18.09	ID# 6107 CK# 3691	QWEST IPAC 925 HIGH ST 9S9 DES MOINES, IA 50305		250.00	<input type="checkbox"/>
12.18.09	ID# CK#	JIM BRICK 6701 WESTOWN PKWY SUITE 100 WEST DES MOINES, IA 502655		250.00	<input type="checkbox"/>
12.18.09	ID# CK#	PAM CONNER 2715 e 40TH ST DM, IA 50317		500.00	<input type="checkbox"/>
12.18.09	ID# CK#	HARRY BOOKEY 400 LOCUST ST SUITE 790 DM, IA 50309		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2100.00	
TOTAL (if last page of this schedule)				\$	

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AMENDING FORM

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12.22.09	ID# CK#	MCKINLEY BAILEY 521 ELMHURST DR WEBSTER CITY, IA 50595		\$20.00	<input type="checkbox"/>
12.22.09	ID# CK#	BRADFORD BURNQUIST 1770 92ND ST WDM, IA 50266		125.00	<input type="checkbox"/>
12.22.09	ID# CK#	JAMIE FITZGERALD 3036 E DIEHL AVE DM, IA 50320		100.00	<input type="checkbox"/>
12.22.09	ID# CK#	JACK HATCH 696 - 18TH ST DM, IA 50314		150.00	<input type="checkbox"/>
12.23.09	ID# CK#	JOHN SARCONI 3004 SW 39TH ST DM, IA 50321		50.00	<input type="checkbox"/>
12.23.09	ID# CK#	KEVIN TECHAU 1118 44TH ST DM, IA 50311		50.00	<input type="checkbox"/>
12.23.09	ID# CK#	JULIE HAGGERTY 9916 TANGLEWOOD DR DM, IA 50322		100.00	<input type="checkbox"/>
12.23.09	ID# CK#	YING SA 2717 NE BRIARWOOD CT ANKENY, IA 50021		2000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2595.00

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.29.09	ID# CK#	LINDA LANGENBERG 5105 NE 23RD AVE UNIT 1201 PLEASANT HILL, IA 50327		\$250.00	<input type="checkbox"/>
12.29.09	ID# CK#	NICHOLAS LUICK 205 SE 4TH ST ANKENY, IA 50021		250.00	<input type="checkbox"/>
12.29.09	ID# CK#	AMANDA LUICK 205 SE 4TH ST ANKENY, IA 50021		250.00	<input type="checkbox"/>
12.29.09	ID# CK#	STEVEN MAURO 3224 SUMMIT VISTA DR DM, IA 50321	SON	500.00	<input type="checkbox"/>
12.29.09	ID# CK#	MICHELLE MAURO 3224 SUMMIT VISTA DR DM, IA 50321	Daughter-n-law	500.00	<input type="checkbox"/>
12.29.09	ID# CK#	JODI MAURO 1110 RANCHEL DR DM, IA 50320	NEICE	500.00	<input type="checkbox"/>
12.29.09	ID# CK#	JAMES CATALDO 3428 ROST AVE DM, IA 50321		500.00	<input type="checkbox"/>
12.29.09	ID# CK#	HOMES BY DESIGN 1333 SW CRESTON DM, IA 50315		750.00	<input type="checkbox"/>
12.29.09	ID# CK#	GEORGE T DAVIS III 3721 SW 29TH ST DM, IA 50321		750.00	<input type="checkbox"/>
12.29.09	ID# CK#	NICHOLAS MAURO 3906 WAKONDA DR DM, IA 50321	SON	1000.00	<input type="checkbox"/>
SUB-TOTAL				\$ 5250.00	
TOTAL (if last page of this schedule)				\$	

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RECEIPTS



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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Elect Michael A Mauro

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12.30.09	ID# CK#	DENISE DOLAN 2830 OAK MEADOW CT DUBUQUE, IA 52003		\$25.00	<input type="checkbox"/>
12.31.09	ID# CK#	MARY NEWELL 100 LINCOLN ST SE BOX 303 BONDURANT, IA 50035		75.00	<input type="checkbox"/>
12.31.09	ID# CK#	TAMMY AGEY 3121 SW 32ND PL D M, IA 50321		100.00	<input type="checkbox"/>
12.31.09	ID# CK#	THOMAS PATTERSON PO BOX 976 DES MOINES, IA 50304		100.00	<input type="checkbox"/>
12.31.09	ID# CK#	JOE MAURO 3121 SW 38TH PL DM, IA 50321	BROTHER	2000.00	<input type="checkbox"/>
12.31.09	ID# CK#	ROBERT SIEMAN 4710 MILLS CIVIC PKWY UNIT 303 WDM, IA 50265		100.00	<input type="checkbox"/>
12.31.09	ID# CK#	PATRICK GILL 3949 FIEDLCREST DR SIOUX CITY, IA 51103		100.00	<input type="checkbox"/>
12.31.09	ID# CK#	LINDA DICKERSON 2617 DRIFTWOOD AVE DM, IA 53020		500.00	<input type="checkbox"/>
12.31.09	ID# CK#	ROB MCCARGAR 2913 N BIRCH AVE CUMMING, IA 50061	NEPHEW	750.00	<input type="checkbox"/>
12.31.09	ID# CK#	KAREN SUE LANE-LIGOURI 3925 SW 28TH PL DM, IA 50321		750.00	<input type="checkbox"/>
SUB-TOTAL				\$ 4500.00	
TOTAL (if last page of this schedule)				\$	

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<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

(Including candidate's personal funds)

COMMITTEE TO ELECT MICHAEL A MAURO

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

[illegible]

\$ 100.00

**TOTAL (if last page of this schedule)**

**\$**

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1.21.09	ID# 9155 CK#	Polk County Democrats PO Box 5102 Des Moines, IA 50309	Contribution	\$ 250.00
1.23.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #1	95.83
2.4.09	ID# CK#	Magna Star Marketing 300 Walnut St. Suite 245 Des Moines, IA 50309	Update Web Site	1625.00
2.20.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule # 2	744.10
3.1.09	ID# CK#	Dahls 3400 E. 33rd St. Des Moines, IA 50317	Postage	42.00
3.16.09	ID# 9098 CK#	IA Sentate Majority Fund, IDP 5661 Fleur Dr. Des Moines, IA 50321	Contribution	100.00
3.19.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule # 3	38.27
3.20.09	ID# CK#	Postmaster 1165 2nd Ave. Des Moines, IA 50309	Postage	239.98
SUB-TOTAL				\$ 3135.18
TOTAL (if last page of this schedule)				\$

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3.25.09	ID# CK#	Carter Printing 1739 E. Grand Ave. Des Moines, IA 50316	Envelopes-Letterhead	\$ 645.54
3.30.09	ID# CK#	Bindery 1, Inc. PO Box 3335 Des Moines, IA 50316	Mailing	145.00
4.3.09	ID# CK#	South Suburban YMCA 401 E. Army Post Rd Des Moines, IA 50315	Charitable Contribution	50.00
4.3.09	ID# CK#	Drake University Alumni Assoc 2507 University Ave. Des Moines, IA 50311	Charitable Contribution	50.00
4.20.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #4	374.70
5.5.09	ID# 9155 CK#	Polk County Democrats PO Box 5102 Des Moines, IA 50309	Contribution	200.00
5.20.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #5	100.00
6.1.09	ID# CK#	US Postmaster 1165 2nd Ave. Des Moines, IA 50309	Postage	114.40
SUB-TOTAL				\$ 1679.64
TOTAL (if last page of this schedule)				\$

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A. MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6.18.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #6	\$ 58.49
7.21.09	ID# CK#	Steve Mauro 3224 Summit Vista Dr Des Moines, IA 50321	Reimbursement for Stamps	21.00
7.23.09	ID# CK#	Carter Printing 1739 E Grand Ave Des Moines, IA 50309	Postcards for Golf Outing	31.80
7.29.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #7	271.67
7.29.09	ID# CK#	Carter Printing 1739 E Grand Ave Des Moines, IA 50316	Car Magnets	207.76
8.14.09	ID# 9155 CK#	Polk County Democrats PO Box 5102 Des Moines, IA 50309	Contribution	100.00
8.24.09	ID# CK#	US Postmaster 1165 2nd Ave Des Moines, IA 50309	Postage	88.00
8.25.09	ID# CK#	Chase PO Box 94014 Palatine, IL 60094	See Schedule #8	239.92
SUB-TOTAL				\$ 1018.64
TOTAL (if last page of this schedule)				\$

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8.28.00	ID# CK#	West Bank P.O. Box 65020 WDM, IA 50265	Non- Sufficient Check Charge	\$ 4.24
8.28.09	ID# CK#	Act Blue P.O. Box 382110 Cambridge, IA 02238	Handling Fee	1.98
8.28.09	ID# CK#	Capital One PO Box 6492 Carol Stream, IL 60197	See Schedule # 9	169.72
8.28.09	ID# CK#	Carter Printing 1739 E Grand Ave. Des Moines, IA 50316	Campaign Cards	629.64
8.28.09	ID# CK#	Blank Golf Course 808 County Line Rd Des Moines, IA 50320	Fees for Golf Outing	3200.00
9.8.09	ID# CK#	Carter Printing 1739 E Grand Ave Des Moines, IA 50316	Printing Nomination Papers	12.72
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 4018.30
TOTAL (if last page of this schedule)				\$

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURES



CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9.18.09	ID# CK#	BLANK GOLF COURSE 808 COUNTY LINE RD DES MOINES, IA 50320	FEES FOR GOLF OUTING	\$ 2500.00
9.30.09	ID# CK#	CAPITOL ONE PO BOX 6492 CAROL STREAM, IL 60197	SEE SCHEDULE #10	109.59
10.19.09	ID# 9155 CK#	POLK COUNTY DEMOCRATS PO BOX 5102 DM, IA 50321	CONTRIBUTION	200.00
10.30.09	ID# CK#	CAPITOL ONE PO BOX 6492 Carol Stream, IL 60197	SEE SCHEDULE #11	206.07
11.09.09	ID# CK#	POSTMASTER 1165 - 2ND AVE DM, IA 50309	STAMPS	88.00
11.9.09	ID# CK#	BEST BUY 5100 SE 14TH DM, IA 50316	INK CARTRIDGES TO PRINT CAMPAIGN LETTERS	31.78
11.16.09	ID# 9098 CK#	IOWA DEMOCRATIC PARTY 5661 FLEUR DR DM, IA 50321	EXHIBIT TABLE FOR JJ	53.00
	ID# CK#			
SUB-TOTAL				\$ 3188.44
TOTAL (if last page of this schedule)				\$

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11.18.09	ID# CK#	POSTMASTER 1165 - 2ND AVE DM, IA 50309	STAMPS	\$ 88.00
11.20.09	ID# CK#	POSTMASTER 1165 - 2ND AVE DM, IA 50309	STAMPS	107.30
12.1.09	ID# CK#	CAPITOL ONE PO BOX 6492 CAROL STREAM, IL 60197	SEE SCHEDULE # 12	147.66
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 342.96
TOTAL (if last page of this schedule)				\$

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(for Schedule B)

COMMITTEE TO ELECT MICHAEL A. MAURO -					SCHEDULE B ITEMIZED - J	JANUARY 1 - DECEMBER 31, 2009
ITEM #	DATE	PAYABLE TO	TOTAL \$	AMOUNT	VENDOR	DESCRIPTION
#1	1.23.09	CHASE	\$95.83	\$34.94	Tumea & Sons	Campaign Meeting
				60.89	Francies	Campaign Meeting
#2	2.20.09	CHASE	\$744.10	\$120.00	Bordenaros Pizza	Campaign Meeting
				\$9.19	McDonald's	Travel - out-of-state - food
				\$9.06	Wendy's	Travel - out-of-state - food
				\$71.95	Spartans Family Restaurant	Travel - out-of-state - food
				\$90.32	Hampton Inns	Travel - out-of-state - lodging
				\$21.50	Commodore	Travel - out-of-state - lodging
				\$23.12	Turkey Hill	Travel - out-of-state - food
				\$15.60	Wash Metro	Travel - out-of-state- gas
				\$17.54	Pilot	Travel - out-of-state- gas
				\$10.50	Embassy Auto	Travel - out-of-state- gas
				\$14.80	Shell Oil	Travel - out-of-state- gas
				\$23.41	Rolling Prairie	Travel - out-of-state- food
				\$6.70	McDonald's	Travel - out-of-state - food
				\$22.89	Johnn Rockets	Travel - out-of-state - food
				\$15.60	Wash Metro	Travel - out-of-state- gas
				\$14.69	Papa Johns	Travel - out-of-state - food
				\$26.36	Speedway	Travel - out-of-state- gas
				\$42.06	Red Lobster	Travel - out-of-state - food
				\$21.34	Thorntons	Travel - out-of-state - food
				\$23.77	Sunoco	Travel - out-of-state- gas
				\$23.12	QT	Travel - out-of-state- gas
				\$84.70	Fairfield Inn	Travel - out-of-state - lodging
				\$35.88	Noah's Ark Ristorante	Campaign Meeting
#3	3.19.09	CHASE	\$38.27	\$19.16	Tumea & Sons	Campaign Meeting
				\$19.11	Principal Park Cub Club	Campaign Meeting
#4	4.20.09	CHASE	\$374.70	\$21.64	QT	Travel - out of town - gas
				\$13.11	McDonalds	Travel - out of town - food
				\$18.08	Hometown Convenience	Travel - out of town - gas

				\$153.55	Wild Rose Casino & Hotel	Travel - out of town - hotel - food
				\$24.85	HyVee Gas	Travel - out of town - gas
				\$27.21	Marriott	Campaign Meeting
				\$30.54	Tumea & Sons	Campaign Meeting
				\$29.19	Marios Italian Restaurant	Campaign Meeting
				\$29.00	Liberty State	Travel - out of town - gas
				\$27.53	QT	Travel - out of town - gas
#5	5.20.09	CHASE	\$100	\$100.00	Eyachner Foundation	Charitable Contribution
#6	6.18.09	CHASE	\$58.49	\$49.50	Baratta's Restaurant	Campaign Meeting
				\$8.99	Blue Domino	Web Page Fee
#7	7.29.09	CHASE	\$271.67	\$14.95	Blue Domino	Web Page Fee
				\$14.95	Blue Domino	Web Page Fee
				\$113.40	Blue Domino	Web Page Fee
				\$35.39	China Moon	Campaign Meeting
				\$22.58	Principal Park Club House	Campaign Meeting
				\$70.40	Dahls	Postage Stamps
#8	8.25.09	CHASE	\$239.92	\$25.63	Pelican Restaurant	Campaign Meeting
				\$196.95	Hot Wire	Travel - out-of-state - lodging
				\$17.34	Tumea & Sons	Campaign Meeting
#9	8.28.09	CAPTIAL ONE	\$169.72	\$28.51	Pilot	Travel - out of town - gas
				\$34.67	Pilot	Travel - out of town - gas
				\$96.00	W Lakeshore Chicago	Travel - out-of-state - parking fees
				\$10.54	Dairy Queen	Travel - out-of- town - food
#10	9.30.09	CAPITAL ONE	\$109.59	\$25.00	QT	Travel - out of town - gas
				\$23.53	Village Inn	Campaign Meeting
				\$32.04	Waveland Café	Campaign Meeting
				\$29.02	Git N Go	Travel - out of town - gas
#11	10.30.09	CAPTIAL ONE	\$206.07	\$27.51	QT	Travel - out of town - gas
				\$28.50	Kum & go	Travel - out of town - gas
				\$74.25	Bordenaro's Pizza	Campaign Meeting

				\$24.67	Principal Park Club House	Campaign Meeting
				\$33.27	Steamboatland	Travel - out of town - gas
				\$17.87	Seven Village Retstaurant	Travel - out of town - food
#12	12.1.09	CAPITAL ONE	\$147.66	\$19.64	Tumea & Sons	Campaign Meeting
				\$32.37	Caseys	Travel - out of town - gas
				\$29.98	Caseys	Travel - out of town - gas
				\$46.01	All Stop	Travel - out of town - gas
				\$19.66	Burger King	Travel - out of town - food

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

COMMITTEE TO ELECT MICHAEL A MAURO

Reset Form

<b>SCHEDULE E</b> (Rev. 06/97)	<b>IN-KIND CONTRIBUTIONS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7.30.09	Jeff Link 4129 Forest Ave. DM, IA 50311		Food & Beverage	\$ 3,033.87	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 3,033.87	
TOTAL (if last page of this schedule)				\$ 3,033.87	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)